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						Assistant Commissioner for Pater			,	City, State and Zip Code	
						1. CORRESPONDENCE ADDRESS B3M1/0507				Hillsborough, CA 94010 2 0 1007	
						COOLEY GODWARD CASTRO				Emmett R. Burns	
HUDDLESON & TATUM				Street Address							
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4TH FLOOR				Jackson, WY 83001							
PALO ALTO CA 94306											
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APPLICATION NO.	FILING DATE	TOTAL CLAIMS		EXAMINER AND GROUP ART UNIT	DATE MAILED						
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Applicant											
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3. Correspondence address chan	nge (Complete only if there is a cha	ange)		ng on the patent front the names of not more than 1 COOL	EY GODWARD LLA						
				ed patent attorneys or agents							
		·		natively, the name of a firm	P. OPPERMAN						
				a member a registered 2 CRAI9 or agent. If no name is listed,	r. officioning						
				will be printed.							
				3							
5. ASSIGNMENT DATA TO BE PRINTI	ED ON THE PATENT (print or type)										
(1) NAME OF ASSIGNEE:				6a. The following fees are enclosed:							
Vicor, Inc. (2) ADDRESS: (CITY & STATE OR COUNTRY)				State Fee Mark Advance Order - # of Copies 6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER							
505 Hamilton Avenue, Palo Alto, CA 94301 U.S. A This application is NOT assigned.											
						-				Any Deficiencies in Enclosed Fees	
						Assignment previously submitted to the Patent and Trademark Office. Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS. PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been perviously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.				The COMMISSIONER OF PATENTS AND TRADE requested to apply the Issue Fee to the application	
(Authorized Signature) (Date)											
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on: <u>May 14, 1</u>		(Date)		· · · · · · · · · · · · · · · · · · ·							
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